

J.C.P

# ● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : 10/606 424 Examiner : Berch GAU : 1624

From: DP Location: IDC FMF FDC Date: 1/6/06

Tracking #: OPM 10/606, 424 Week Date: 10/10/2005

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>8/9/2005</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input type="checkbox"/> OATH		
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

[RUSH] MESSAGE: Renumbered claim 3 (original claim 16)  
depends on a canceled original claim 1, please resolve

*Thank you*

[XRUSH] RESPONSE: NOW FIXED

INITIALS: MB

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04